Postoperative Instructions for Extractions/Oral Surgery

Patie	nt: Date:
	child had the following procedure performed today: Biopsy Extraction Exposure of unerupted tooth Gingivectomy Gingival graft Wound management Other:
	will require special care and attention over the next few days. Please follow the instructions checked below. Contact us with ions or if unusual symptoms develop.
	Numbness: The mouth will be numb approximately two to four hours. Watch to see that your child does not bite, scratch, or injure the cheek, lips, or tongue during this time.
	Bleeding: Bleeding was controlled before we discharged your child, but some occasional oozing (pink or blood-tinged saliva) may occur. Hold gauze with firm pressure against the surgical site until oozing has stopped. You may need to change the gauze or repeat this step. If bleeding continues for more than two hours, contact us.
	Surgical site care: Today, do not disturb the surgical site. Do not stretch the lips or cheeks to look at the area. Do not rinse vigorously, use mouthwash, or probe the area with fingers or other objects. Beginning tomorrow, you may rinse with warm salt water (½ teaspoon salt with one cup water) after meals.
	Sutures: Sutures (stitches) were placed to help control bleeding and promote healing. These sutures:
	☐ will dissolve and do not need to be removed OR ☐ will be removed at your follow-up visit. If the stitches come out during the first 48 hours, call our office.
	Daily activities: Today, avoid physical exercise and exertion. Return to normal activities as tolerated. Smoking is never good for one's health and may delay healing following oral surgery.
	Diet: After all bleeding has stopped, the patient may drink cool noncarbonated liquids but should NOT use a straw. Encourage fluids to help avoid dehydration. Cold soft foods (e.g., applesauce, diced peaches, watermelon, ice cream, gelatin, pudding, yogurt) are ideal the first day. By the second day, consistency of foods can progress as tolerated. Until healing is more established, avoid foods such as nuts, sunflower seeds, and popcorn that may get lodged in the surgical areas.
	Oral hygiene: Keeping the mouth clean is essential. Today, teeth may be brushed and flossed gently, but avoid stimulating the surgical site. Soreness and swelling may not permit vigorous brushing of all areas, but please make every effort to clean the teeth within the bounds of comfort.
	Pain: Because some discomfort is expected, you may give your child acetaminophen (Tylenol®), ibuprofen (Advil®, Motrin®), or naproxen (Aleve®, Anaprox®, Naprosyn®) before the numbness wears off. Do NOT give aspirin to your child. Follow the instructions on the bottle for dosing based upon your child's age/weight. If pain is not relieved by one of these medications, you may alternate acetaminophen and ibuprofen every three hours. Please call our office if pain cannot be controlled with these medications.
	Prescription: You were prescribed □ pain medicine □ antibiotics □ oral rinse □ other
	Other:
	Watch for:
	□ Swelling: Slight swelling and inflammation may occur for the next two days. Ice packs may be used for the first 24 hours (10 minutes on then 10 minutes off) to decrease swelling and/or bruising. Keep the head elevated; avoid lying flat. If swelling persists after 24 hours, warm moist compresses (10 minutes on then 10 minutes off) may help. If swelling occurs after 48 hours, call our office. □ Fever: A slight fever (temperature to 100.5° Fahrenheit) is not uncommon the first 48 hours after surgery. If a higher fever develops or the fever persists, call our office.
	□ Dry socket: Premature dissolving or loss of a blood clot following removal of a permanent tooth may result in a dry socket. This typically occurs on the third to fifth day after the extraction, with a persistent throbbing pain in the jaw. Call our office if this occurs.
	Follow-up: Schedule your child's next visit for in days/weeks/months.
Cont	ract numbers: Office: After hours: